## Case 1:19-bk-11677 Doc 1 Filed 10/31/19 Entered 10/31/19 14:27:40 Desc Main Document Page 1 of 54

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF RHODE ISLAND	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:	About Debtor 2 (Spous	se Only in a Joint Case):
1.	Your full name			
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Corinna		
		First name	First name	
		Middle name	Middle name	
		Mendez		
		Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (S	Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	Corinna Jackson		
	Include your married or maiden names.	Corinna Scurry		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2264		

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Case number (if known)

Debtor 1 Corinna Mendez

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		338 Douglas Avenue Apartment 2 Providence, RI 02908				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Providence County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known) Debtor 1 Corinna Mendez

Par	t 2: Tell the Court About	our B	ankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Required b</i> page 1 and check the appropri	v 11 U.S.C. § 342(b) for Individuals Filing for Bankı ate box.	ruptcy	
	choosing to file under	■ CI	Chapter 7					
		□ с	hapter 11					
		□ cı	hapter 12					
		□ с	hapter 13					
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	pically, if you are paying the fee	ck with the clerk's office in your local court for mor yourself, you may pay with cash, cashier's check, on half, your attorney may pay with a credit card or ch	or money	
					tallments. If you choose this op is (Official Form 103A).	ion, sign and attach the Application for Individuals	to Pay	
						on only if you are filing for Chapter 7. By law, a jud		
			applies to you	ır family size an	nd you are unable to pay the fee	our income is less than 150% of the official povert in installments). If you choose this option, you must		
			the Application	n to Have the C	Chapter 7 Filing Fee Waived (Of	icial Form 103B) and file it with your petition.		
9.	Have you filed for bankruptcy within the	■ No	).					
	last 8 years?	☐ Ye	S.					
			District		When	Case number		
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is	☐ Ye						
	not filing this case with you, or by a business partner, or by an affiliate?	ш те	5.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your	□ No	Go to li	ne 12.				
	residence?	■ Ye	Has yo	ur landlord obta	ained an eviction judgment agair	st you?		
		_ 16	.ss.	No. Go to line				
			_	Yes. Fill out <i>Inc</i> bankruptcy pet		Judgment Against You (Form 101A) and file it wit	h this	

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Case number (if known) Debtor 1 Corinna Mendez

ar	Report About Any Bu	sinesses	You Own	as a Sole Propriet	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	siness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code
	it to this petition.		Check	the appropriate bo	ox to describe your business:
					ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	e
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you in	dicate that you are ow statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure
		■ No.	I am n	ot filing under Chap	oter 11.
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fi Code.	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am fi	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Pari	t 4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is t	he hazard?	
	public health or safety? Or do you own any		If immed	iate attention is	
	property that needs immediate attention?			why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	
					Number, Street, City, State & Zip Code

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Debtor 1 Corinna Mendez

Case number (if known)

Part 5:

**Explain Your Efforts to Receive a Briefing About Credit Counseling** 

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 Corinna Mendez Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Corinna Mendez Signature of Debtor 2 Corinna Mendez Signature of Debtor 1 Executed on October 7, 2019 Executed on MM / DD / YYYY MM / DD / YYYY

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Debtor 1 Corinna Mendez Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ James T. Marasco	Date	October 7, 2019
Signature of Attorney for Debtor		MM / DD / YYYY
James T. Marasco		
Printed name		
Law Office of James T. Marasco		
Firm name		
617 Smith Street		
Providence, RI 02908		
Number, Street, City, State & ZIP Code		
Contact phone 401-421-7500	Email address	
2370 RI		
Bar number & State		<del></del>

		1200:11116	<u> </u>	<u> </u>	
Fill in this infor	mation to identify your	case:			
Debtor 1	Corinna Mendez				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE I	SLAND		
Case number					<b>-</b> 0
(if known)					Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		.,	
		Your as	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,820.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,820.00
Par	t 2: Summarize Your Liabilities		
			<b>abilities</b> t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	85.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	39,712.68
	Your total liabilities	\$	39,797.68
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,652.27
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,051.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	nedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a personal,	family, or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Corinna Mendez

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

5,445.25

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cla	im
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	85.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	85.00

		Documer	nt Page 10 of 54	
Fill in this infor	mation to identify your	case and this filing:		
Debtor 1	Corinna Mendez			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE ISL	LAND	
Case number _				☐ Check if this is an amended filing
				arriended ming
Official Fo	orm 106A/B			
Schedul	le A/B: Prop	erty		12/15
hink it fits best. E nformation. If mo Answer every que	Be as complete and accura re space is needed, attach stion.	te as possible. If two married a separate sheet to this form.	ce. If an asset fits in more than one category, list t people are filing together, both are equally respon . On the top of any additional pages, write your nar You Own or Have an Interest In	sible for supplying correct
			uilding, land, or similar property?	
■ No. Go to Pa	, , ,	,	,,	
Yes. Where				
	ie and property.			
Part 2: Describe	Your Vehicles			
			cles, whether they are registered or not? Incl	
	•		e G: Executory Contracts and Unexpired Leases	).
3. Cars, vans, tr	rucks, tractors, sport ut	ility vehicles, motorcycles	5	
■ No				
☐ Yes				
			al vehicles, other vehicles, and accessories els, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
			ries from Part 2, including any entries for	\$0.00
.pages you n	ave attached for Part 2.	write that number nere	=)	
	Your Personal and House			
Do you own or	have any legal or equita	able interest in any of the	following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
	oods and furnishings ajor appliances, furniture,	linens, china, kitchenware		
□ No ■ Yes. Desc	oriha			
<b>—</b> 165. D650			1	<b></b>
	Living roo	m set		\$400.00
	Vitaban a	n <del>t</del>		\$400.00
	Kitchen se	\$L		\$400.00

Official Form 106A/B Schedule A/B: Property page 1

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Document Page 11 of 54 Case number (if known) Debtor 1 **Corinna Mendez** Miscellaneous household goods and furnishings, etc no one item \$1,200.00 more than \$200 in vlaue \$300.00 Bedroom set 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Television set \$100.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$300.00 Clothing Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$100.00 **Jewelry** 13. Non-farm animals Examples: Dogs, cats, birds, horses ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information.....

Part 4: Describe Your Financial Assets

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

for Part 3. Write that number here .....

\$2,800.00

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Case number (if known) Debtor 1 Corinna Mendez Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Yes..... Cash \$5.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$10.00 Citizens Bank **Checking Account** \$5.00 **Checking Account** Citizens Bank 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): Official Form 106A/B Schedule A/B: Property

☐ Yes.....

page 3

D	ebtor 1	Corinna Mendez	Document	Page 13 of 54 Case number (if known)	
25	Trusts,		(other than anythin	ng listed in line 1), and rights or powers exercis	sable for your benefit
	■ No				·
	☐ Yes.	Give specific information about them			
26	_Examp	s, copyrights, trademarks, trade secrets, les: Internet domain names, websites, prod			
	■ No □ Yes.	Give specific information about them			
27	Examp  ■ No			n holdings, liquor licenses, professional licenses	
	☐ Yes.	Give specific information about them			
M	oney or p	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	Tax ref	unds owed to you			
	■ No □ Yes. 0	Give specific information about them, include	ding whether you alre	eady filed the returns and the tax years	
29	■ No	les: Past due or lump sum alimony, spousa	al support, child supp	ort, maintenance, divorce settlement, property set	tlement
	⊔ Yes. (	Give specific information			
30		mounts someone owes you les: Unpaid wages, disability insurance pay benefits; unpaid loans you made to so		efits, sick pay, vacation pay, workers' compensat	ion, Social Security
		Give specific information			
31	_Examp	ts in insurance policies les: Health, disability, or life insurance; hea	ılth savings account (	HSA); credit, homeowner's, or renter's insurance	
	■ No □ Yes. I	Name the insurance company of each polic	ev and list its value.		
		Company name:	y and not no value.	Beneficiary:	Surrender or refund value:
32	If you a	erest in property that is due you from so are the beneficiary of a living trust, expect p are has died.		ed isurance policy, or are currently entitled to receive	property because
	■ No □ Yes.	Give specific information			
33		against third parties, whether or not you les: Accidents, employment disputes, insur			
	_	Describe each claim			
34	Other c	ontingent and unliquidated claims of ev	ery nature, includin	g counterclaims of the debtor and rights to se	t off claims
		Describe each claim			
35	Any fin	ancial assets you did not already list			
	■ No	Ohra anasilia intannatia			
	∟ res.	Give specific information			

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Debtor 1	Corinna Mendez	Case number (if known)	
	I the dollar value of all of your entries from Part 4, includ Part 4. Write that number here		\$20.00
Part 5:	Describe Any Business-Related Property You Own or Have an Int	erest In. List any real estate in Part 1.	
7. Do yo	u own or have any legal or equitable interest in any business-rela	ated property?	
■ No.	Go to Part 6.		
☐ Yes.	Go to line 38.		
	Describe Any Farm- and Commercial Fishing-Related Property York fyou own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interest In.	
6. <b>Do y</b>	ou own or have any legal or equitable interest in any farn	n- or commercial fishing-related property?	
■ N	o. Go to Part 7.		
ΠY	es. Go to line 47.		
	<u>_</u>		
Part 7:	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above	
	ou have other property of any kind you did not already lis	st?	
	mples: Season tickets, country club membership		
■ No	Cive energific information		
⊔ re	s. Give specific information		
54. <b>Ad</b>	the dollar value of all of your entries from Part 7. Write t	that number here	\$0.00
	_		
Part 8:	List the Totals of Each Part of this Form		
55. <b>Par</b>	t 1: Total real estate, line 2		\$0.00
56. <b>Pa</b> r	t 2: Total vehicles, line 5	\$0.00	
57. <b>Pa</b> r	t 3: Total personal and household items, line 15	\$2,800.00	
58. <b>Pa</b> r	t 4: Total financial assets, line 36	\$20.00	
59. <b>Par</b>	t 5: Total business-related property, line 45	\$0.00	
60. <b>Pa</b> r	t 6: Total farm- and fishing-related property, line 52	\$0.00	
61. <b>Pa</b> r	t 7: Total other property not listed, line 54	+ \$0.00	

\$2,820.00

Copy personal property total

Official Form 106A/B Schedule A/B: Property page 5

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$2,820.00

\$2,820.00

			<u> </u>	<del></del>
Fill in this infor	mation to identify your	case:		
Debtor 1	Corinna Mendez			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE I	SLAND	
Case number				
(if known)				☐ Check if the amended f

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property	' You Claim as Exempt
-------------------------------	-----------------------

	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)			
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)					
2.	For any property you list on Schedule A/B	that you claim as exe	as exempt, fill in the information below.				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.			
	Living room set Line from Schedule A/B: 6.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)		
	Line IIIIII Schedule AVB. 0.1			100% of fair market value, up to any applicable statutory limit			
	Kitchen set Line from Schedule A/B: 6.2	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)		
	Ellie Holli ochicdate 74 B. G.Z			100% of fair market value, up to any applicable statutory limit			
	Miscellaneous household goods and furnishings, etc no one item more	\$1,200.00		\$1,200.00	11 U.S.C. § 522(d)(3)		
	than \$200 in vlaue Line from Schedule A/B: 6.3			100% of fair market value, up to any applicable statutory limit			
	Bedroom set Line from Schedule A/B: 6.4	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)		
	Line Irom Schedule AVB. 0.4			100% of fair market value, up to any applicable statutory limit			
	Television set Line from Schedule A/B: 7.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)		
	LITE HOTH SCHEUUIE AVD. 1.1			100% of fair market value, up to any applicable statutory limit			

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Corinna Mendez Corinna Mendez

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Clothing Line from Schedule A/B: 11.1	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)
	Elite Hoffi Govedale 775. TTT			100% of fair market value, up to any applicable statutory limit	
	Jewelry Line from Schedule A/B: 12.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)
	Line Holli Schedule A/D. 12.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
	Line Hotti Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking Account: Citizens Bank Line from Schedule A/B: 17.1	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
	Line Holli Schedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	
	Checking Account: Citizens Bank Line from Schedule A/B: 17.2	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
	Line from Goreage 745. Tr.2			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every  ■ No			led on or after the date of adjustme	nt.)
	<ul><li>Yes. Did you acquire the property cover</li></ul>	ed by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No			•	
	Π Yes				

		1700.11111	.II FAUE 17 ULJ4	
Fill in this infor	mation to identify your	case:		
Debtor 1	Corinna Mendez			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF RHODE	ISLAND	
Case number				
(if known)				

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

		Document	Page	18 of	54	-			
Fill in this inforr	mation to identify your cas	se:							
Debtor 1	Corinna Mendez								
	First Name	Middle Name	Last Nam	Э					
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Nam	)					
United States Ba	nkruptcy Court for the: [	DISTRICT OF RHODE ISLAND							
0 1									
Case number _ (if known)							•	if this is an ed filing	
Official Forn		o Have Unsecured (	Claim	S				12/15	
any executory cont Schedule G: Execu Schedule D: Credit eft. Attach the Con name and case nur Part 1: List A	tracts or unexpired leases that tory Contracts and Unexpire tors Who Have Claims Secure ntinuation Page to this page. mber (if known).		t executo not inclued eeded, co	ry contrac ide any cre py the Par	ets on Schedule A/B: editors with partially t you need, fill it out	Property (O secured cla number the	fficial Forr ims that a e entries in	n 106A/B) an re listed in i the boxes o	nd on
<ol> <li>Do any credito</li> <li>No. Go to P</li> </ol>	ors have priority unsecured c	laims against you?							
Yes.	rait 2.								
identify what ty possible, list the Part 1. If more	pe of claim it is. If a claim has be e claims in alphabetical order a than one creditor holds a partic	f a creditor has more than one priority on priority and nonpriority amounts according to the creditor's name. If you are claim, list the other creditors in the instructions for this form in the i	, list that on ou have m Part 3.	claim here a lore than tw	and show both priority	and nonprior	rity amount	s. As much as	s of
2.1 City of	Providence	Last 4 digits of account	t number	2414	\$85.00		\$85.00		\$0.00
PO Box	editor's Name <b>c</b> 55884 <b>, MA 02205</b>	When was the debt inco	urred?	2017					
	Street City State Zip Code	As of the date you file,	the claim	is: Check	all that apply				
Who incurred	d the debt? Check one.	☐ Contingent							
Debtor 1 o	only	☐ Unliquidated							
Debtor 2 o	only	☐ Disputed							
Debtor 1 a	and Debtor 2 only	Type of PRIORITY unse	cured cla	im:					
☐ At least or	ne of the debtors and another	☐ Domestic support obli	igations						
☐ Check if t	this claim is for a community	debt Taxes and certain oth	er debts y	ou owe the	government				
Is the claim s	subject to offset?	Claims for death or pe	ersonal inj	ury while yo	ou were intoxicated				
■ No		Other. Specify							
☐ Yes		Ticl	ket						
Part 2: List A	II of Your NONPRIORITY	Unsecured Claims							
3. Do any credito	ors have nonpriority unsecur	ed claims against you?							
☐ No. You ha	ve nothing to report in this part.	. Submit this form to the court with ye	our other	schedules.					
Yes.									
unsecured clair	m, list the creditor separately fo	ns in the alphabetical order of the or each claim. For each claim listed, the other creditors in Part 3.If you ha	identify wl	nat type of o	claim it is. Do not list o	laims already	y included i	in Part 1. If mo	

Total claim

Part 2.

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Corinna Mendez	Case number (if known)	
ABC Financial	Last 4 digits of account number 9320	\$20.00
Nonpriority Creditor's Name PO Box 6800 North Little Book AB 72424	When was the debt incurred? 2018	
North Little Rock, AR 72124  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Services	
Acceptance Now	Last 4 digits of account number 1026	\$8,962.00
Nonpriority Creditor's Name 8020 S. Gessner Drive Houston, TX 77034	When was the debt incurred? 2013	
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Rental Agreement Credit	
Atmed Treatment Center	Last 4 digits of account number 2472	\$50.00
Nonpriority Creditor's Name 1524 Atwood Avenue	When was the debt incurred? 2016	
Suite 122 Johnston, RI 02919  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	□ Courting out	
_	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
_	Student loans	
☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Services	

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Debtor 1 Corinna Mendez ase number (if known) 4.4 \$361.00 Cox Communications\* Last 4 digits of account number 0097 Nonpriority Creditor's Name **Collection Department** When was the debt incurred? 2014 1341 Crossways Boulevard Chesapeake, VA 23320 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Services ☐ Yes 4.5 Cox Communications\* Last 4 digits of account number 0097 \$147.00 Nonpriority Creditor's Name **Collection Department** When was the debt incurred? 2014 1341 Crossways Boulevard Chesapeake, VA 23320 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Services** Other. Specify 4.6 **Credit One Bank** \$824.00 Last 4 digits of account number 8396 Nonpriority Creditor's Name PO Box 98873 When was the debt incurred? 2017 Las Vegas, NV 89193 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card ☐ Yes

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Debt	or 1 Corinna Mendez		Case number (if known)	
4.7	DOI/LUKE, AAL, LLLC Nonpriority Creditor's Name	Last 4 digits of account number	146	\$2,170.15
	IslandLawyers 1600 Kapiolani Blvd Ste. 1300 Wahiawa, HI 96786	When was the debt incurred?	2012-13	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Services		
4.8	Fort Bragg Credit Union	Last 4 digits of account number	0150	\$886.00
	Nonpriority Creditor's Name Bldg, 4-3871 Bastone Drive Fort Bragg, NC 28307	When was the debt incurred?	2010-14	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Loan		
4.9	Military Star Card / Exchange	Last 4 digits of account number	1717	\$1,600.00
	Nonpriority Creditor's Name 3911 Walton Walker Dallas, TX 75266	When was the debt incurred?	2009-12	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	

☐ Yes

■ Other. Specify Credit card

Page 22 of 54 Case number (if known) Debtor 1 Corinna Mendez 4.1 \$602.43 National Grid\* 4025 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 11739 When was the debt incurred? 2018 Newark, NJ 07101-4739 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Services 4.1 One Main 3324 \$7,459.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 1010 When was the debt incurred? 2010-12 Evansville, IN 47706 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Credit card ☐ Yes 4.1 One Main Financial 8454 \$4.895.00 Last 4 digits of account number Nonpriority Creditor's Name 6801 Colwell Rd. When was the debt incurred? 2010-12 Irving, TX 75039 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Credit card

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Deb	Corinna Mendez	Case number (if known)	
4.1 3	Pioneer	Last 4 digits of account number 1012	\$4,616.00
<u> </u>	Nonpriority Creditor's Name 3240 E Tropicana	When was the debt incurred? 2012	
	Las Vegas, NV 89121  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card	
4.1 4	Progressive Leasing	Last 4 digits of account number 0795	\$1,067.56
	Nonpriority Creditor's Name 256 Data Drive Draper, UT 84020	When was the debt incurred? 2019	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No □ Yes	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Goods	
4.1 5	Sterling Kay Jewelers	Last 4 digits of account number 6959	\$4,307.00
	Nonpriority Creditor's Name 375 Ghent Road Akron, OH 44333	When was the debt incurred? 2015	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Credit card	

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Debto	Corinna Mendez		Case number (if known)		
4.1	Torrid	Lock 4 dissite of account number	5471	\$508.68	
6	Nonpriority Creditor's Name	Last 4 digits of account number		<b>\$300.00</b>	
	PO Box 182789	When was the debt incurred?	2017		
	Columbus, OH 43218	_			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Credit card			
4.1	Verizon Wireless*	Lord Patron Control	0001	\$487.86	
7	Nonpriority Creditor's Name	Last 4 digits of account number		φ401.00	
	Bankruptcy Department PO Box 15062	When was the debt incurred?	2016		
	Albany, NY 12212  Number Street City State Zip Code	As of the date you file, the claim	is. Chack all that apply		
	Who incurred the debt? Check one.	As of the date you me, the claim	S. Oneck all that apply		
	Debtor 1 only	Continues t			
		☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed	d alabas		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify Services			
4.1	World Financial Net Nat Bank	Lord Police of Control	9995	\$749.00	
8	Nonpriority Creditor's Name	Last 4 digits of account number		φ/ <del>4</del> 3.00	
	PO Box 182273 Columbus, OH 43218	When was the debt incurred?	2015		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	ast one of the debtors and another  Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community				
	debt	Obligations arising out of a sepa	aration agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing	g plans, and other similar debts		
	☐ Yes	Other Specify Credit card			

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Corinna Mendez	Document Paç	Je 25 01 54 Case number (if known)	
Name and Address Associated Credit Services INC PO Box 5171 Westborough, MA 01581-5171	On which entry in Part 1 or Part 2 or Line 4.10 of (Check one):  Last 4 digits of account number	did you list the original creditor?  □ Part 1: Creditors with Priority Unsecured Claims  ■ Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address	On which entry in Part 1 or Part 2	·	
FBCS 330 South Warmeaster Road Ste. 352 Hatboro, PA 19040	Line <b>4.6</b> of ( <i>Check one</i> ):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Jefferson Capitol 16 McLeland Road Saint Cloud, MN 56303	On which entry in Part 1 or Part 2 or Line 4.17 of (Check one):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Linebarger Goggan Blair & Samp 900 Arion Parkway Suite 1074 San Antonio, TX 78216	On which entry in Part 1 or Part 2 of Line 2.1 of (Check one):	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
•	Last 4 digits of account number		
Name and Address LVNV Funding PO Box 390846 Minneapolis, MN 55439	On which entry in Part 1 or Part 2 of Line 4.6 of (Check one):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Portfolio Recovery Services 120 Corporate Boulevard Norfolk, VA 23502	On which entry in Part 1 or Part 2 of Line 4.18 of (Check one):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Total Card Inc. 2700 S Lorraine Place Sioux Falls, SD 57109	On which entry in Part 1 or Part 2 cline 4.17 of (Check one):  Last 4 digits of account number	did you list the original creditor?  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 85.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 85.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 39,712.68

Page 26 of 54 Case number (if known) Debtor 1 Corinna Mendez

Total Nonpriority. Add lines 6f through 6i.

6j. \$ 39,712.68

		17/7/11/11/	<u> </u>	
Fill in this info	rmation to identify your	case:		
Debtor 1	Corinna Mendez			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF RHODE	ISLAND	
Case number				
(if known)				

## Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	<del>-</del>

`	5000 1.10 BK 11017	Docume	nt Page 28 d	nf 54	27.40 BC30 Mam
Fill in this	information to identify your				
Debtor 1	Corinna Mendez				
20210	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filio	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	DISTRICT OF RHODE I	ISLAND		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
Officia	l Form 106H				
	lule H: Your Cod	lobtore			40/45
Scried	iule II. Toul Cou	ientoi s			12/15
ill it out, a our name		e boxes on the left. Attach a). Answer every question	the Additional Page t	to this page. On the to	needed, copy the Additional Page, op of any Additional Pages, write
	, ou	you are ming a joint case, t	do not not ounor opodoo	do a obdebion.	
■ No □ Yes	8				
2 18/:4	hin the leat 0 years, have ye	lived in a community on		n.2 (Community proper	tratata and tarritarias in aluda
	nin the last 6 years, have yo la, California, Idaho, Louisiana				ty states and territories include )
■ Na	Go to line 3.				
	s. Did your spouse, former spo	ouse, or legal equivalent live	with you at the time?		
	2.a year epeace, .ee. epe	rass, or regar equitations are			
in line Form out Co	e 2 again as a codebtor only 106D), Schedule E/F (Officia olumn 2.	if that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The cr Check all schedul	reditor to whom you owe the debt les that apply:
				_	.,,
3.1	Name			Schedule D, lir	
				☐ Schedule E/F,☐ Schedule G, lii	
=	N				
	Number Street City	State	ZIP Code		
	· 				
3.2				☐ Schedule D, lir	2
	Name			Schedule E/F.	
				☐ Schedule G, lii	
-	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your c	ase:									
Del	otor 1 Corinna Me	ndez				_					
1	btor 2 puse, if filing)					_					
Uni	ited States Bankruptcy Court for the	: DISTRICT OF RHOD	E ISLANI	)		_					
Cas	se number						Check	k if this is:			
(If kr	nown)		-				☐ Ar	n amende	d filing		
										ng postpetition cha following date:	apter
0	fficial Form 106I							M / DD/ Y		ronowing date.	
	chedule I: Your Inc	ome					IVI	IVI / DD/ Y	111		12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	ır spouse is not filing w	ith you, c	lo not include	e inforr	natio	on about	your spo	use. If m	nore space is nee	eded,
1.	Fill in your employment information.		Debto	r 1				Debtor 2	or non-	filing spouse	
	If you have more than one job,	Employment status	■ Employed					■ Emplo	yed		
	attach a separate page with information about additional	Employment status	☐ Not employed					☐ Not employed			
	employers.  Include part-time, seasonal, or	Occupation	VA Disability/Pt. Time Reception				Traffic Enforcement				
	self-employed work.  Occupation may include student or homemaker, if it applies.	Employer's name	Eliza Body	Williams Re	storat	ive	LifeSpan				
	or nomemaker, ir it applies.	Employer's address									
		How long employed t	here?	3 months	S			_1	8 years		
Par	rt 2: Give Details About Mo	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have	nothing to rep	ort for	any	line, write	\$0 in the	space. Ir	nclude your non-fil	ing
	ou or your non-filing spouse have mee space, attach a separate sheet to		ombine th	e information	for all e	mplo	oyers for t	that perso	n on the	lines below. If you	need
							For Deb	otor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	1,	560.00	\$	2,990.00	
3.	Estimate and list monthly over	ime pav.			3.	+\$		0.00	+\$	0.00	

Official Form 106I Schedule I: Your Income page 1

1,560.00

2,990.00

Calculate gross Income. Add line 2 + line 3.

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Deb	tor 1	Corinna Mendez	_	Case	number (if known)			
				Foi	Debtor 1		btor 2 or	
	_						ing spouse	
	Copy	y line 4 here	4.	\$_	1,560.00	\$	2,990.00	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	188.76	\$	529.75	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	429.22	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify: Supp Life	5h.+	\$	0.00	+ \$	61.01	
		FIDLCU 401K		\$	0.00	\$	209.30	
		Spouse Life	_	\$_	0.00	\$	2.25	
		Child Life		\$_	0.00	\$	0.95	
		Legal		\$_	0.00	\$	18.20	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	188.76	\$	1,250.68	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	1,371.24	\$	1,739.32	
8.	List	all other income regularly received:						
	8a.	Net income from rental property and from operating a business,						
		profession, or farm Attach a statement for each property and business showing gross						
		receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent						
		regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive		_				
		Include cash assistance and the value (if known) of any non-cash assistance	e					
		that you receive, such as food stamps (benefits under the Supplemental						
		Nutrition Assistance Program) or housing subsidies.  Specify: VA Disability	8f.	\$	1,541.71	\$	0.00	
	8g.	Pension or retirement income	— 8g.	\$-	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	· -	0.00	· -	0.00	
	011.				0.00	. —		7
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,541.71	\$	0.00	
								<u> </u>
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$		2,912.95 + \$	1,739	0.32 = \$	4,652.27
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				<u> </u>		
11.	State	e all other regular contributions to the expenses that you list in Schedule	. J.					
		ide contributions from an unmarried partner, members of your household, your		dents	, your roommates	s, and		
		r friends or relatives.						
		not include any amounts already included in lines 2-10 or amounts that are not	availab	le to	pay expenses list	ed in <i>Sch</i>		0.00
	Spec	City:					11. +\$	0.00
12	hhΑ	the amount in the last column of line 10 to the amount in line 11. The res	sult is th	e cor	nhined monthly in	ncome		
		e that amount on the Summary of Schedules and Statistical Summary of Certain						4.050.05
	appli	ies					12.   \$	4,652.27
							Combin	ed
	_							income
13.	Do y	you expect an increase or decrease within the year after you file this form	?					
		No.						
		Yes. Explain:						

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Fill	in this informat	tion to identify yo	ur casa.							
Deb	tor 1	Corinna Men	dez					f this is:		
Deb	tor 2						•	amended filing	ving postpetition char	nter
	ouse, if filing)								the following date:	7101
Unit	ed States Bankr	uptcy Court for the:	DISTRI	CT OF RHODE ISLAND			M	M / DD / YYYY		
l	e number nown)									
Of	fficial Fo	rm 106J								
S	chedule	J: Your E	Exper	ses						12/15
Be info	as complete a ormation. If me mber (if know	and accurate as ore space is nee n). Answer ever	possible eded, atta y questio	If two married people ar ch another sheet to this						
Par 1.	t 1: Descri	ibe Your House	hold							
١.	_									
	■ No. Go to	line 2. <b>s Debtor 2 live i</b> i	n a canar	oto household?						
			n a sepan	ate nousenoid?						
	□ No		t file Offici	al Form 106J-2, <i>Expenses</i>	s for Senarate House	hold of D	ehtor	2		
_			_	ari 01111 1000 2, <i>Exponde</i>	ror deparate rioddel	7101G 01 B	CDIO	2.		
2.	Do you have	e dependents?	☐ No							
	Do not list De Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		_	Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents i	names.			Daughter			12	Yes	
									☐ No	
					Daughter			13	Yes	
									□ No	
									☐ Yes	
									□ No □ Yes	
3.	Do vour exp	enses include	_	N <sub>-</sub>					⊔ Yes	
	expenses of yourself and	people other the people of the	nan nts?	No Yes						
Est exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the		n assistance and		government assistance i luded it on <i>Schedule I:</i> \				Your expe	enses	
4.		r home ownersi		ses for your residence. I	nclude first mortgage	e 4.	\$		892.00	
	If not includ	,	<b>J</b>				_			
	4a. Real e	state taxes				4a.	\$		0.00	
		rty, homeowner's	, or renter	's insurance		4b.			17.00	
		•		ıpkeep expenses		4c.	\$ -		50.00	
_		owner's associati				4d.			0.00	
5.	Additional n	nortgage payme	ents for yo	our residence, such as ho	me equity loans	5.	\$		0.00	

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Debtor 1	Corinna Mendez	Case num	ber (if known)	
	4			
6. <b>Utili</b> 6a.	ties: Electricity, heat, natural gas	6a.	•	303.00
6b.	Water, sewer, garbage collection	6b.	· -	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	·	
6d.	Other. Specify:	6d.	·	350.00
	• •		*	0.00
	d and housekeeping supplies	7.	·	1,400.00
	dcare and children's education costs	8.	\$	50.00
	hing, laundry, and dry cleaning	9.	\$	250.00
	sonal care products and services	10.	\$	450.00
	lical and dental expenses	11.	\$	300.00
	nsportation. Include gas, maintenance, bus or train fare.  not include car payments.	12.	\$	270.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.		80.00
	ritable contributions and religious donations	14.	· -	50.00
5. Insu	•	14.	Φ	30.00
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15b. 15c.	·	160.00
	Other insurance. Specify:	15d.	*	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.	13u.	Ψ	0.00
	cify: car taxes	16.	\$	29.00
	allment or lease payments:			23.00
	Car payments for Vehicle 1	17a.	\$	0.00
	Car payments for Vehicle 2	17b.	· <del></del>	0.00
	Other. Specify: Husbands loan/credit card payments	17c.	·	400.00
	Other. Specify:	17d.		0.00
	r payments of alimony, maintenance, and support that you did not report		Ψ	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106		\$	0.00
	er payments you make to support others who do not live with you.	-,-	\$	0.00
Spe		19.		
). <b>Oth</b>	er real property expenses not included in lines 4 or 5 of this form or on So	chedule I: Yo	our Income.	
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Homeowner's association or condominium dues	20e.	\$	0.00
1. Othe	er: Specify:	21.		0.00
	· · · · · · · · · · · · · · · · · · ·		,	0.00
	culate your monthly expenses			
	Add lines 4 through 21.		\$	5,051.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	2	\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	5,051.00
2 (2-1-	sulate your monthly not income			
	culate your monthly net income.	22-	¢	4 CEO 07
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		4,652.27
<b>23</b> 0.	Copy your monthly expenses from line 22c above.	23b.	-φ	5,051.00
220	Subtract your monthly expenses from your monthly income			
23C.	Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> .	23c.	\$	-398.73
	THE TESUR IS YOUR MONUMY HER INCOME.	200.	L.	<del>-</del>
For e	you expect an increase or decrease in your expenses within the year after example, do you expect to finish paying for your car loan within the year or do you expect y			e or decrease because of a
	fication to the terms of your mortgage?			
Пν	es Explain here:			

<b>—</b> 110.	
☐ Yes.	Explain here:

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Fill in th	his informa	ation to identify your	case:					
Debtor	1	Corinna Mendez						
		First Name	Middle Name	Las	Name			
Debtor 2 (Spouse if		First Name	Middle Name	Las	Name			
United S	States Bank	cruptcy Court for the:	DISTRICT OF RHODE	ISLAND				
Case nu	umber						<b>–</b> 0	
(if known)							Check if this is an amended filing	
You mus	st file this f g money o	orm whenever you fi	connection with a bank	s or amende	d schedules. Mak	ing a false stat	ement, concealing property, or 00, or imprisonment for up to 20	
	Sign E	Below						
Die	d you pay o	or agree to pay some	one who is NOT an attor	ney to help	you fill out bankrı	uptcy forms?		
_	No							
	Yes. Na	me of person					okruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)	)
		of perjury, I declare rue and correct.	that I have read the sum	ımary and s	chedules filed with	n this declarati	on and	
Х	/s/ Corin	na Mendez		Х				
	Corinna Signature	Mendez of Debtor 1			Signature of Debto	or 2		
	Date Oc	tober 7, 2019			Date			

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Fill	in this info	ormation to identify you	r case:					
Del	btor 1	Corinna Mendez						
Dal	btor 2	First Name	Middle Name	La	st Name			
	ouse if, filing)	First Name	Middle Name	La	st Name			
Uni	ited States E	Bankruptcy Court for the:	DISTRICT OF RHODE	ISLAND				
	se number nown)						_	theck if this is an mended filing
Sta Be a info	atemer	e and accurate as poss more space is needed,	Affairs for Indivible. If two married people attach a separate sheet to	are filing t	ogether, both are	e equally responsi		
		wn). Answer every que	stion. irital Status and Where Yo	ou Lived Re	fore			
1.		our current marital statu		ou Liveu be	iore			
••		our our one maritar orace						
	■ Marrie	ed narried						
2.	During the	e last 3 years, have you	lived anywhere other thar	n where yo	u live now?			
	■ No □ Yes.	List all of the places you I	ived in the last 3 years. Do	not include	where you live no	N.		
	Debtor 1	Prior Address:	Dates Debtor	1	Debtor 2 Prior A	ddress:		Dates Debtor 2 lived there
<b>3.</b> stat			ver live with a spouse or le lifornia, Idaho, Louisiana, N					
	■ No □ Yes.	Make sure you fill out <i>Scl</i>	nedule H: Your Codebtors (	Official Forr	n 106H).			
Pa	rt 2 Exp	lain the Sources of You	r Income					
4.	Fill in the to	otal amount of income yo	nployment or from operati u received from all jobs and have income that you recei	d all busines	ses, including par	t-time activities.	vious caler	ndar years?
	■ No □ Yes.	Fill in the details.						
			Debtor 1			Debtor 2		
			Sources of income Check all that apply.		income deductions and ons)	Sources of incommendation Check all that a		Gross income (before deductions and exclusions)

Page 35 of 54 Document ase number (if known) Debtor 1 Corinna Mendez Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until VA Disability \$13,875.39 the date you filed for bankruptcy: For last calendar year: **VA Disability** \$16,980.00 (January 1 to December 31, 2018) 2017 Tax refund \$4.986.00 For the calendar year before that: **VA Disability** \$16,980.00 (January 1 to December 31, 2017) 2016 Tax refund \$4,827.00 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?  $\square$  No. Go to line 7. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Álso, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address Dates of payment Total amount Amount vou Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment

paid

still owe

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Case 1:19-bk-11677 Doc 1 Filed 10/31/19 Entered 10/31/19 14:27:40 Page 36 of 54 Document ase number (if known) Debtor 1 Corinna Mendez 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address** Amount you Reason for this payment Dates of payment Total amount paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Status of the case Nature of the case Court or agency Case number Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No П Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address:

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total Describe what you contributed Value Dates vou more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code)

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

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Debtor 1 Corinna Mendez

	or gambling?						
	No						
	☐ Yes. Fill in the details.						
	how the loss occurred	nclude	the amount that insceed claims on line 33	urance has paid. Li	ist pending	Date of your loss	Value of property lost
			50 5145 5115 55		, openy,		
Par	List Certain Payments or Transfers						
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or prolinclude any attorneys, bankruptcy petition pre	eparin	g a bankruptcy pe	tition?			erty to anyone you
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid		Description and	value of any prope	artv	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You		transferred	value of any prope	ar ty	or transfer was made	payment
	reison with made the rayment, it not ro	u					
17.	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that you	ors or	to make payment			or transfer any propo	erty to anyone who
	No						
	☐ Yes. Fill in the details.						
	Person Who Was Paid Address		Description and transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers include gifts and transfers that you have alreated No	<b>busin</b> e nade a	ess or financial aff as security (such as	airs? the granting of a se			
	Yes. Fill in the details.						
	Person Who Received Transfer Address		Description and property transfer		paymen	e any property or ts received or debts exchange	Date transfer was made
	Person's relationship to you					_	
19.	Within 10 years before you filed for bankrubeneficiary? (These are often called asset-p			ny property to a se	elf-settled t	rust or similar device	of which you are a
	☐ Yes. Fill in the details.						
	Name of trust		Description and	value of the prope	rty transfe	rred	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, In	nstrun	nents, Safe Deposi	t Boxes, and Stor	age Units		
20	Within 4 year before you filed for bonkering		un any financial ac		aanta bald	in	varir banafit alasad
20.	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asset No	or oth	er financial accou	nts; certificates o			
	Yes. Fill in the details.						
			4.4.41	T			
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		t 4 digits of ount number	Type of accouninstrument	c n	Date account was closed, sold, noved, or ransferred	Last balance before closing or transfer

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Debtor 1 Corinna Mendez

21.	<ol> <li>Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?</li> </ol>						
	No Silving to the sil						
	Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
22.	Have you stored property in a storage unit or p	place other than your home within 1	year before you filed for bankruptcy	?			
	No						
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?			
Par	t 9: Identify Property You Hold or Control for	Someone Else					
23.	Do you hold or control any property that some for someone.	one else owns? Include any propert	y you borrowed from, are storing for	, or hold in trust			
	■ No						
	Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value			
Par	t 10: Give Details About Environmental Inform	nation					
For	the purpose of Part 10, the following definitions	s anniv					
	and purpose of that to, and tonorming dominations	. црр.у.					
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or		waste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings that y	ou know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that yo	ou may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any	·					
	_	,					
	No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Corinna Mendez Corinna Mendez Signature of Debtor 2 Signature of Debtor 1 Date October 7, 2019 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1 Corinna Mendez

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Debtor 1	Corinna Mendez			
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Case number	ankruptcy Court for the:	DISTRICT OF RHODE I		
f known)				☐ Check if this is a amended filing

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<u>_</u>
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Corinna Mendez	Case number (if	known)
name:		☐ Retain the property and redeem it.	☐ Yes
Danasis	ation of	☐ Retain the property and enter into a	
proper	otion of	Reaffirmation Agreement.  Retain the property and [explain]:	
	ng debt:	— Retain the property and [explain].	
Part 2:	List Your Unexpired Personal Prope	rty Leases	
For any u in the info	nexpired personal property lease tha ormation below. Do not list real estate	t you listed in Schedule G: Executory Contracts and Une e leases. Unexpired leases are leases that are still in effectly enty lease if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
Describe	your unexpired personal property le	ases	Will the lease be assumed?
Lessor's I	name: on of leased		□ No
Property:			☐ Yes
Lessor's i	name: on of leased		□ No
Property:			☐ Yes
Lessor's	name: on of leased		□ No
Property:			☐ Yes
Lessor's	name: on of leased		□ No
Property:			☐ Yes
Lessor's			□ No
Property:	on of leased		☐ Yes
Lessor's i	name: on of leased		□ No
Property:			☐ Yes
Lessor's i	name: on of leased		□ No
Property:			☐ Yes
Part 3:	Sign Below		
	nalty of perjury, I declare that I have i that is subject to an unexpired lease.	ndicated my intention about any property of my estate th	at secures a debt and any personal
	Corinna Mendez	X	
	inna Mendez lature of Debtor 1	Signature of Debtor 2	
Date	October 7, 2019	Date	

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Fill in this i	information to identify your case:		Ch	eck one	box only as d	irected in	this form and in	Form
Debtor 1	Corinna Mendez			2A-1Su				
Debtor 2 (Spouse, if filing	ng)			■ 1. Tł	nere is no pres	umption c	of abuse	
United Sta	tes Bankruptcy Court for the: District of Rhode I	sland		а		nade unde	ne if a presumpt er <i>Chapter 7 Me</i>	
Case num (if known)	ber			□ 3. Tł	ne Means Test	does not	apply now beca	
					eck if this is a		,	/ later.
Officia	l Form 122A - 1			L CITE	tck II II II 15 15 a	ii ailleil	ieu illing	
	er 7 Statement of Your Cur	rent Mor	nthly Inc	ome	•			10/19
attach a sep case numbe	lete and accurate as possible. If two married people a parate sheet to this form. Include the line number to we er (if known). If you believe that you are exempted fro hillitary service, complete and file Statement of Exemp	hich the additior m a presumption	nal information a of abuse becau	applies. Ise you (	On the top of ar	ny addition narily con	nal pages, write y sumer debts or b	our name and ecause of
Part 1:	Calculate Your Current Monthly Income							
	is your marital and filing status? Check one or	ıly.						
	ot married. Fill out Column A, lines 2-11.							
_	arried and your spouse is filing with you. Fill ou			2-11.				
_	arried and your spouse is NOT filing with you.	•	•					
_	Living in the same household and are not lega	•			•			
Ц	<b>Living separately or are legally separated.</b> Fill of penalty of perjury that you and your spouse are living apart for reasons that do not include evading	egally separated	d under nonbar	kruptcy	law that applie	es or that		
101(10A) the 6 mo	e average monthly income that you received from all ). For example, if you are filing on September 15, the 6-m nths, add the income for all 6 months and divide the total own the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 thro sult. Do not inclu	ugh Augi de any ir	ust 31. If the amo	ount of your	r monthly income vance. For example,	varied during if both
				Colum Debto		Column Debtor non-fili		
	gross wages, salary, tips, bonuses, overtime, oll deductions).	and commission	ons (before all	\$	3,904.25	\$	0.00	
	ony and maintenance payments. Do not include nn B is filled in.	payments from	a spouse if	\$	0.00	\$	0.00	
of yo from a and re	mounts from any source which are regularly pa u or your dependents, including child support. an unmarried partner, members of your household oommates. Include regular contributions from a sp in. Do not include payments you listed on line 3.	Include regular d, your depender	r contributions nts, parents,	\$	0.00	\$	0.00	
	ncome from operating a business, profession,							
		Deb \$ 0.00	otor 1					
	s receipts (before all deductions)	-\$ 0.00						
	ary and necessary operating expenses nonthly income from a business, profession, or far		Copy here ->	\$	0.00	\$	0.00	
	ncome from rental and other real property			· —		·		
		Deb	otor 1					
Gross	s receipts (before all deductions)	\$ 0.00						
	ary and necessary operating expenses	-\$ 0.00			0.00	•	0.00	
Net m	nonthly income from rental or other real property	\$	Copy here ->		0.00	\$	0.00	
7. Intere	est, dividends, and royalties			\$	0.00	Ψ	0.00	

Official Form 122A-1

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ebtor 1	Corin	DO nna Mendez	cument Paç 	je 43 (		er ( <i>if known</i> )			
					Column A Debtor 1		Column B Debtor 2 o		
8. <b>U</b> ı	nemploy	ment compensation			\$	0.00	\$	0.00	
		er the amount if you contend that the amount Security Act. Instead, list it here:		efit under					
	For you <sub></sub>			.00					
	For your	spouse .		.00					
be nc Ur dis pa dc	enefit und ot include nited Stat sability, o ay paid ur oes not ex	retirement income. Do not include any a er the Social Security Act. Also, except as any compensation, pension, pay, annuity, es Government in connection with a disability death of a member of the uniformed servinder chapter 61 of title 10, then include that acced the amount of retired pay to which you der any provision of title 10 other than chapter 61.	stated in the next sente or allowance paid by the ity, combat-related injuces. If you received ar pay only to the extent or would otherwise be	ence, do ne ury or ny retired that it	\$	0.00	\$	0.00	
Do re do Ur dis	o not inclu eceived as omestic te nited Stat sability, o	om all other sources not listed above. Spude any benefits received under the Social a victim of a war crime, a crime against hurrorism; or compensation, pension, pay, ares Government in connection with a disability death of a member of the uniformed servia separate page and put the total below.	Security Act; payment imanity, or internationa inuity, or allowance pa ity, combat-related inju	s al or id by the ury or					
	. <u>V</u>	A Disability			\$ <u>1</u>	,541.00	\$	0.00	
					\$	0.00	\$	0.00	
	To	stal amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
		your total current monthly income. Add lin. Then add the total for Column A to the to		\$	5,445.25	+ \$ _	0.00	=\$_	5,445.25
art 2:	Dete	ermine Whether the Means Test Applies	to You					Total incon	current monthly ne
12. <b>C</b> a	alculate v	our current monthly income for the yea	r. Follow these steps:						
	-	your total current monthly income from line	· ·		Cop	by line 11	nere=>	\$	5,445.25
	Multip	ly by 12 (the number of months in a year)						X	12
12	2b. The re	sult is your annual income for this part of the	ne form				12b	D. \$	65,343.00
13. <b>C</b> a	alculate t	he median family income that applies to	you. Follow these ste	ps:					
Fil	II in the st	ate in which you live.	RI						
Fil	II in the n	umber of people in your household.	4						
To	o find a lis	nedian family income for your state and size of applicable median income amounts, go n. This list may also be available at the ban	online using the link		in the sepa		13. tions	\$1	03,813.00
14. <b>H</b> o	ow do the	e lines compare?							
14	4a. ■	Line 12b is less than or equal to line 13. (	On the top of page 1, c	heck box	1, There is	no presun	ption of abus	se.	
14	4b. 🗖	Go to Part 3.  Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	2, The pr	esumption o	of abuse is	determined b	y Form 1	22A-2.
art 3:	Sign	Below							
an O		ning here, I declare under penalty of perjur	v that the information of	n this st	atement and	in any att	achments is t	rue and o	correct
			, alactic illioillation	30	atomont and	aniany all	aominonto lo t	i do ariu (	JOI1001.
		Corinna Mendez rinna Mendez							
		nature of Debtor 1							

Date October 7, 2019

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Debtor 1	Corinna Mendez	Ü	Case number (if known)	
	MM/DD/YYYY			
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with this form			

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Debtor 1 Corinna Mendez Case number (if known)

#### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 04/01/2019 to 09/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **Employment Income** Constant income of **\$2,990.00** per month.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Employment Income

Year-to-Date Income:

Starting Year-to-Date Income: \$\,\bigsquare\$0.00 from check dated 3/31/2019.

Ending Year-to-Date Income: \$5,485.50 from check dated 9/30/2019

Income for six-month period (Ending-Starting): **\$5,485.50**.

Average Monthly Income: \$914.25.

Line 10 - Income from all other sources

Source of Income: VA Disability

Constant income of \$1,541.00 per month.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 1:19-bk-11677 Doc 1 Filed 10/31/19 Entered 10/31/19 14:27:40 Desc Main Document Page 50 of 54

B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court District of Rhode Island

In re	Corinna Mendez		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENSATI	ON OF ATTORNI	EY FOR DE	EBTOR(S)
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I cert compensation paid to me within one year before the filing of the per rendered on behalf of the debtor(s) in contemplation of or in contemplation.	petition in bankruptcy, or a	greed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	1,000.00
	Prior to the filing of this statement I have received		\$	0.00
	Balance Due		\$	1,000.00
2.	\$_335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	☐ Debtor ☐ Other (specify): Legal Plan			
5.	■ I have not agreed to share the above-disclosed compensation	with any other person unle	ss they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with copy of the agreement, together with a list of the names of the			
6.	In return for the above-disclosed fee, I have agreed to render lega	l service for all aspects of	the bankruptcy o	ease, including:
	a. Analysis of the debtor's financial situation, and rendering advib. Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and codd. [Other provisions as needed]	affairs and plan which may	be required;	
7.	By agreement with the debtor(s), the above-disclosed fee does not Representation of the debtors in any discharge any other adversary proceeding.			es, relief from stay actions or
	CERT	TIFICATION		
	I certify that the foregoing is a complete statement of any agreement ankruptcy proceeding.	ent or arrangement for pay	ment to me for re	epresentation of the debtor(s) in
C	ctober 7, 2019	/s/ James T. Marasco		
$\overline{D}$	ate	James T. Marasco Signature of Attorney		
		Law Office of James	T. Marasco	
		617 Smith Street		
		Providence, RI 02908 401-421-7500 Fax: 4		
		Name of law firm		

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#### United States Bankruptcy Court District of Rhode Island

ı re	Corinna Mendez	Debtor(s)	Case No. Chapter	7
	VERIFICATION OF CREDITOR MA			
abo	ove-named Debtor hereby verifie	s that the attached list of creditors is true and	correct to the best	of his/her knowledge.
ıte:	October 7, 2019	/s/ Corinna Mendez		

Signature of Debtor

ABC Financial PO Box 6800 North Little Rock AR 72124

Acceptance Now 8020 S. Gessner Drive Houston TX 77034

Associated Credit Services INC PO Box 5171 Westborough MA 01581-5171

Atmed Treatment Center 1524 Atwood Avenue Suite 122 Johnston RI 02919

City of Providence PO Box 55884 Boston MA 02205

Cox Communications\*
Collection Department
1341 Crossways Boulevard
Chesapeake VA 23320

Credit One Bank PO Box 98873 Las Vegas NV 89193

DOI/LUKE, AAL, LLLC IslandLawyers 1600 Kapiolani Blvd Ste. 1300 Wahiawa HI 96786

FBCS 330 South Warmeaster Road Ste. 352 Hatboro PA 19040

Fort Bragg Credit Union Bldg, 4-3871 Bastone Drive Fort Bragg NC 28307 Jefferson Capitol 16 McLeland Road Saint Cloud MN 56303

Linebarger Goggan Blair & Samp 900 Arion Parkway Suite 1074 San Antonio TX 78216

LVNV Funding PO Box 390846 Minneapolis MN 55439

Military Star Card / Exchange 3911 Walton Walker Dallas TX 75266

National Grid\* PO Box 11739 Newark NJ 07101-4739

One Main PO Box 1010 Evansville IN 47706

One Main Financial 6801 Colwell Rd. Irving TX 75039

Pioneer 3240 E Tropicana Las Vegas NV 89121

Portfolio Recovery Services 120 Corporate Boulevard Norfolk VA 23502

Progressive Leasing 256 Data Drive Draper UT 84020

Sterling Kay Jewelers 375 Ghent Road Akron OH 44333

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Torrid PO Box 182789 Columbus OH 43218

Total Card Inc. 2700 S Lorraine Place Sioux Falls SD 57109

Verizon Wireless\*
Bankruptcy Department
PO Box 15062
Albany NY 12212

World Financial Net Nat Bank PO Box 182273 Columbus OH 43218